

OFFICE USE ONLY (Document #)

**L. ZARUS CORPORATE FILING SERVICE, INC.**

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305) 552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

100002647131--7

-09/23/98 -01053--027

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OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. TRANSAMERICA CARD SERVICES, INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED FILED  
98 SEP 23 AM 11:08  
DIVISION OF CORPORATIONS  
98 SEP 23 PM 2:11  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

Examiner's Initials

ARTICLES OF INCORPORATION  
OF

*TRANSAMERICA CARD SERVICES, INC.*

FILED  
98 SEP 23 PM 2:11  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

TRANSAMERICA CARD SERVICES, INC.

The principal address of this corporation shall be:

3667 Vista Way  
Weston, FL 33331

BUSINESS

ARTICLE II. NATURE OF

This corporation may engage or transact in any or all lawful activities for business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock have a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be 3667 Vista Way, Weston, FL 33331, and the name of the initial registered agent of the corporation at that address CLIVE EDWARDS

## ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

## ARTICLE VI. SPECIAL PROVISION

This corporation shall have officer(s) and director(s), initially. The name and street address of the initial officer(s) and director(s) who shall hold office for the first year of the corporation, of until his successor is elected or appointed are/is:

CLIVE EDWARDS  
3667 VISTA WAY  
WESTON, FL 33331

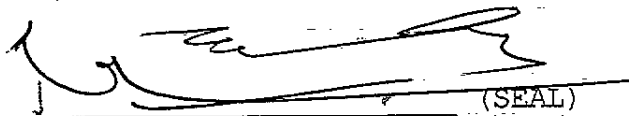
*President & Secretary*

## ARTICLE VII. SUBSCRIBER

The name and street address of the subscriber to these Articles of Incorporation is:

CLIVE EDWARDS  
3667 VISTA WAY  
WESTON, FL 33331

In WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this 21<sup>st</sup> day of SEPTEMBER, 1998.

  
(SEAL)

State of Florida

County of Dade

The foregoing instrument was acknowledged before me this \_\_\_\_\_  
day of SEPTEMBER, 1998, by

\_\_\_\_\_  
Notary Public, State of Florida at Large

My Commission Expires \_\_\_\_\_

Certificate designated place of business or domicile for the service of process within Florida, naming agent upon whom process may be served

In compliance with section 48.091, Florida Statutes, the following is submitted:

First that TRANSAMERICA CARD SERVICES, INC.  
(Name of Corporation)

Desiring to organize or qualify under the laws of the State of Florida, with its principle place of business at city of WESTON,  
(City)

State of Florida, has named CLIVE EDWARDS  
(State) (Name of resident agent)

Located at 3667 VISTA WAY  
(Street address and number of building)  
(Post office box addresses ARE NOT acceptable)

City of WESTON, State of Florida, as its agent to accept  
(City)

services of process within Florida.

SIGNATURE

(Director)

TITLE

DATE

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

SIGNATURE

(Resident agent)

DATE

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the Corporation is: \_\_\_\_\_

TRANSAMERICA CARD SERVICES, INC.

2. The name and address of the registered agent and office is:

CLIVE EDWARDS

(Name)

3667 VISTA WAY

(P.O. Box NOT ACCEPTABLE)

WESTON, FL 33331

(City/State/Zip)

SIGNATURE \_\_\_\_\_

(Director)

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

98 SEP 23 PM 2:11

FILED

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_